

To: Regional Workgroup
From: Bob Lincoln
Date: October 17, 2011
Re: Additional Specific Functions for Regions:

1. Allow Regions to contract with DHS to provide Interim Assistance Reimbursement for individuals with pending applications for disability under Social Security.
2. Give Regions authority to hire Mental Health Advocates as currently allowed for counties with populations over 300,000. Ultimately, it would be a dramatic improvement and cost savings to the Mental Health & Disability system to change Advocates to Case Managers. In the beginning, Advocates helped get individuals out of state institutions now they work to get individuals to their outpatient appointments and stay connected with their providers. The case management role more accurately meets the need of individuals under a mental health commitment.
3. Make the Regional Designated Case Management Agencies the Access Points to apply for the Waiver programs. The Case Management Agencies then forward the request onto DHS workers and into ISIS (state database) while helping applicants access the best Waiver. Case Management can help with interim services while individuals are waiting for a slot. Under the current structure, individuals apply for several waivers and do not find out if they qualify until after waiting several months.
4. Give Regions the ability to contract with the state Mental Health Institutes and Resource Centers for beds. Communities cannot provide adequate crisis stabilization without an institutional option for individuals deemed to be too unsafe to serve in the community.
5. Give the Regions the ability to include Substance Abuse Detox charges; charges for children admitted to Toledo and non-state cost of shelter care within their budget to better integrate services for individuals.
6. Assign Money Follows the Person (MFP) Case Managers to each Region. This would improve coordination efforts to reduce Iowa's dependence on institutional care.